Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>7-30-2010</u>	Address:	350 E. EAST OF 1000 E.
Case #:	<u>24-31734</u>		NORTH WEBSTER
County:	<u>KOSCIUSKO</u>		<u>INDIANA</u>
Type of Laboratory Seizure (check one) ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Seizure Location (Residence Outbuilding Vehicle	check all that apply) Hotel/Motel Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): open air			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium): open air			
Anhydrous Ammonia: open air			
Corrosive Acid: open air			
Corrosive Base: open air			
Other (item and location):			
Child under age 18 discovered (check one) ☐ Yes (number present) ☐ No *If yes, fax report to Child Protective Services		Investigative Information ☐ Ephedrine/Pseudoephedrine Tracking Log ☐ Retail/Merchant Tip ☐ Other:LE	
This report is to be faxed to the following agencies that serve the location:			
Fire Depar	tment: NORTH WEBSTER VFD	Fax: <u>574-834-7676</u> Fax: <u>(574) 269-2023</u> Fax:	
Health Dep	partment: KOSCIUSKO CO.		
Child Prote	ection Service: <u>n/a</u>		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Tpr. Jeff Wampler</u> Phone <u>574-546-4900</u>			

- This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- *** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.